



Newsletter 8—24 April, 2014

Inside this issue:			
WHO & Traditional & Complementary Medicine	2	Homeopathy & Private Health Insurance— Lessons from the UK	5
Therapeutic Goods Administration	2	Recommendations for pathology tests in Australia	6
Victorian Government— Better Health Channel	2	Stop the AVN	7
University News	3	FSM Submissions	7
Australian Health Practitioner Regulation Agency (AHPRA)	4	Recognition	8
Veterinary Science & homeopathy in the USA	5	Publications	8







National Health & Medical Research Council (NH&MRC)

New publications

Two important documents from the NHMRC were released in April. The NHMRC Draft Information Paper on the Evidence on Homeopathy found that based on their assessment of the current evidence "there is no reliable evidence that homeopathy is effective for treating any health condition". This generated a number of articles in the media. FSM wrote to the CEO of the NHMRC to congratulate him and his committee on their thorough and definitive report on the effectiveness of Homeopathy and offering our support during and after the consultation period.

The NHMRC has a announced a consultation period on their information paper (closing date 26 May 2014), and we encourage you to record your yes/no supporting vote.

The NHMRC also announced their "Talking with your Patients about Complementary Medicine - A Resource for Clinicians". This booklet was developed to encourage discussions between doctors and patients about the evidence, effectiveness and potential risks of complementary and alternative interventions.

Formal funding guidelines

Following the Swisse/Harvey controversy, FSM wrote to the NH&MRC asking them to generate formal guidelines for research funding that would reflect the "world's best practices", as this is needed to protect the credibility and integrity of contracted research, particularly where the results could affect the pecuniary interests of the funder. Our request highlighted that any guidelines written would be relevant to all health directed research, not just to Alternative and Complementary Medicine research.





World Health Organisation (WHO) & Traditional & Complementary Medicine

Following FSM correspondence with the WHO, which included four letters over a six month period, they have now removed their acupuncture webpage, as it referred to an out-dated report that was "no longer appropriate to be posted there".

Under the section 'Diseases and disorders that can be treated with acupuncture', the website claimed that acupuncture had been "proved - through controlled trials to be an effective treatment" of 28 conditions and effective, but needed more proof, for 63 more. In our letter we

included details of over <u>60 Cochrane reviews</u> on acupuncture.

The WHO have "started a major initiative to address questions in a range of TCM [Traditional & Complementary Medicine] areas" and are planning a "comprehensive approach in the area of research on traditional and complementary medicine, including acupuncture".

FSM documented images from 300 practitioner /organisational websites (part a & part b) promoting the now removed WHO claims for acupuncture as "evidence".

Therapeutic Goods Administration

In July 2010, *In vitro diagnostic* (IVD) devices came <u>under the jurisdiction</u> of the Therapeutic Goods Administration (TGA). Sponsors of existing devices, which until then had been exempt, were given four years to apply for a listing on the Australian Register of Therapeutic Goods (ARTG).

FSM has <u>written to</u> the TGA about an effective mechanism to cancel specific 'low risk' medical devices, based on performance deficiencies. We asked a series of questions relating to invalid IVD devices, complementary medicines and

tests kits used for pathology testing and 'biofeedback', as well as 'patient monitoring devices', sold to health practitioners for electrodermal screening (EDS). Despite numerous requests for investigation, several high profile EDS devices remain on the ARTG.

FSM sent reports to the TGA detailing hundreds of practitioner websites promoting EDS (part a and part b) and live blood analysis. Many of the websites documented claim that consultations attract private health insurance rebates.

Victorian Government's Better Health Channel

According to their website, the <u>Better Health Channel</u> "provides health and medical information that is quality assured, reliable, up to date, easy to understand, regularly reviewed and locally relevant" and it is "fully funded by the State Government of Victoria (Australia)".

FSM wrote a <u>letter to the Secretary, Department of Health, Victoria</u> about our concerns about misinformation published on acupuncture and an advertisement for Homeopathy Week. Individual supporters of science-based

medicine including blogger <u>Jo Alabaster</u> also wrote expressing concerns.

While their acupuncture page continues to state that <u>"research has found that acupuncture may be effective in treating a range of disorders"</u> they have now removed their Homeopathy Week advertising. A good outcome.



University news

Victoria University

Great news from Victoria University!
In the past six months their Vice Chancellor (VC) has:

- removed all "practical classes involving cranial technique" stating that "Cranial osteopathy is no longer taught in the Osteopathy program" (2014);
- discontinued hosting Sutherland Cranial Teaching Foundation of Australia and New Zealand courses (2014);
- closed their Paediatric Osteopathy clinic (2014),and
- cancelled their Osteopathy, Paediatric Masters course (2013).

FSM appreciates the significance of these initiatives from a university that has a reputation for excellence. However, there are still a number of universities that are failing to maintain the academic rigour expected of our major educational institutions (including RMIT, Southern Cross University and Central Queensland University), as they continue to provide unacceptable credibility to health related pseudoscience. FSM hopes that the actions of Victoria University will set the standard for these universities to follow.

What is a 'Cranial Osteopath'?

A Cranial Osteopath is one who practices so called 'Craniosacral Therapy (CST)' (also called 'craniotherapy', 'Osteopathy of the Cranial Field (OCF)' and chiropractic 'Sacro-Occipital Technique (SOT)'). It is a pseudo-scientific intervention that is based on the idea that our spinal fluid is pulsating and that our "cranial bones are sufficiently movable to enable a therapist to feel this pulse from the outside". Practitioners of cranial osteopathy claim that it is possible to influence this process with gentle manipulations which, in turn, can 'treat' a wide range of diseases. This idea is manifestly pseudoscientific as there is no evidence for cranial rhythms "generated through organic motility of brains" and, to quote Professors Steve E Hartman and James M Norton, the technique "bears approximately the same relationship to real medicine that astrology bears to astronomy".

RMIT

Concerned that the pseudo-scientifically based interventions of <u>Applied Kinesiology</u> (also called

manual muscle testing) and Sacro-Occipital Therapy (SOT) are being included in their Chiropractic degree, FSM wrote to the Vice Chancellor of RMIT raising our concerns. Also offered at RMIT are courses in 'energy medicine' and 'osteopathy of the cranial field (OCF)' (similar to SOT). We received a response from Professor Coloe at the end of March that defended the continued teaching of Applied Kinesiology and SOT while admitting that there was no scientific support for either. We are continuing with our attempts to have RMIT follow the lead of Victoria University and eliminate such pseudoscience from their curricula.

Central Queensland University (CQU)

FSM wrote to the VC on 22 January, 2014 expressing concern that chiropractic students are being taught pseudo-scientific principles of Applied Kinesiology and Paediatric Chiropractic. CQU was a major sponsor of the International College of Applied Kinesiology (ICAK) International Conference, held in Cairns in 2013. Fourteen of their first-year students attended this conference. At this time no response has been received.

La Trobe University

On 30 January 2014, La Trobe University issued a press release announcing that they were accepting a \$15million deal to partner with Swisse Wellness. Concerned that the partnership of his university with this high profile complementary medicine sponsor involved "a fundamental conflict of interest both for the proposed CMEC and the staff involved", FSM Friend, Dr Ken Harvey, a noted campaigner for truth in the promotion of complementary medicines, resigned from La Trobe University. In his letter to the VC, Dr Harvey cited a broad range of complaints upheld by the Therapeutic Goods Administration's Complaints Resolution Panel (TGACRP) against Swisse.

After complaints by Dr Harvey in 2012, the <u>TGA CRP investigated Swisse</u>, finding many products made misleading claims, or claims that had not been verified, or aroused unwarranted expectations. Swisse was ordered to remove claims that their products were "clinically proven" or

"independently tested", as well as its slogan "Tired? Stressed? You'll feel better on Swisse".



University news ctd...

Swisse was ordered to withdraw advertising for 11 products and to stop using the slogan as they were unable to provide evidence to back their claims.

FSM <u>wrote</u> to the La Trobe VC, supporting Dr Harvey in his concerns about this partnership. Over 20 articles appeared in the media, both <u>in Australia</u> and overseas.

Australian Health Practitioner Regulation Agency (AHPRA)

Chiropractic

FSM wrote to AHPRA regarding concerns that chiropractors were using the potentially dangerous "Webster Breech Turning Technique", which claims that it can turn breech foetuses in utero. Also called the "Webster In-Utero Constraint Technique", the Chiropractic Board of Australia (CBA) has approved a "Perinatal Care - Webster Certification" course, which attracts 12 Continuing Professional Development (CPD) hours. More than 150 "Webster Technique Certified" practitioners were listed in the report, including the President and Treasurer of the Chiropractors' Association of Australia (CAA). This course is one of more than 40 approved by the CAA, and endorsed by the CBA, that target pregnant women, babies and children.

External cranial version of a breech fetus is a potentially dangerous procedure with several contraindications and is unnecessary before 37 weeks gestation. It should not be attempted by alternate therapists or outside obstetric institutions. Ultrasound, cardiotocography and emergency caesarean delivery facilities and obstetric experience are necessary. Risks include antepartum haemorrhage, cord entanglement, stillbirth, membrane rupture, cord prolapse, preterm delivery and uterine rupture. Despite being alerted by FSM the Royal Australian and New Zealand College of Obstetricians and Gynaecologists is so far silent on this particular dangerous alternative practice and the increasing targeting of obstetric, gynaecological and newborn conditions by alternative practitioners using non-evidence based and non-physiological therapies.

Two other FSM letters to AHPRA were sent:

Re: Mixed standards of ethical behaviour for orthodox practitioners: questioning the different standards of ethical behaviour for orthodox

practitioners compared to registered alternative medicine practitioners; and

Re: Registered practitioners: requesting information about the new Statutory Offences Unit (SOU), and also why there are two courses still approved by the Chiropractic Board of Australia (CBA) that are being advertised and which target babies and children.

AHPRA requested a meeting with FSM to discuss the report and these letters. This took place in Sydney early in April. FSM met with AHPRA's General Counsel, Dominic Saunders and Executive Officer (Policy), Helen Townley, who is responsible for advice to AHPRA on advertising standards and other matters. After a lengthy and constructive discussion it was clear that as currently constituted there are no reporting lines that would allow oversight of a Board's performance. Thus there is not within the AHPRA structure, an authority who could force a board to limit the scope of practice provided by registrants. There was always the intention to have a review of AHPRA's performance after its first three years of existence and that time has come. It was agreed that FSM would write to Minister Skinner, current Chair, Standing Council on Health, requesting the establishment of that review process. This we have done.

Doctors' concerns about legitimised pseudoscience- based courses in Australian Universities and anti-vaccination propaganda by registered alternative health practitioners were highlighted in 2013, with two articles on chiropractic making the top ten highest rating list in Australian Doctor journal. At number 8 was "University to expel chiropractors courses" (May - 5425 Views) and at number 9 was "Chiropractors ordered to ditch anti-vax message" (August - 5229 Views)



AHPRA ctd...

Nursing & Physiotherapy

FSM has identified more than 60 websites run by <u>physiotherapists</u> and <u>nurses</u> which promote pseudo-science-based interventions, including cranial osteopathy and visceral manipulation. If

you are a nurse or a physiotherapist and concerned about the promotion of these interventions in your profession please write to your college and also complain to your AHPRA board. We can provide you with a list of these websites.

Veterinary Science & Homeopathy in the USA

Practitioners of Homeopathy believe that homeopathic treatments can cure a wide range of illnesses by stimulating the body's own healing response to disease by methods that defy established chemistry, physics, physiology and pharmacology . While the American Veterinary Medical Association (AVMA) admits that homeopathy is useless, it continues to support licensed veterinarians who believe in it. According to the AVMA, it is ethical and appropriate for "true believers" to sell and to make claims about the safety and effectiveness of homeopathy, regardless of any scientific evidence to the This appears to conflict with the AVMA policy on Complementary, Alternative, and Integrative Veterinary Medicine:

AVMA believes that all aspects of veterinary medicine should be held to the same standards, including complementary, alternative and integrative veterinary medicine, non-traditional or other novel approaches. The foremost objectives in veterinary medicine are the health and welfare of the patient. Diagnosis and treatment should be based on sound, accepted principles of veterinary medicine and the medical judgement of the veterinarian."

FSM has not investigated whether veterinarians in Australia use homeopathic treatments in their practices, but FSM Friends have told us that some veterinarians do so. Tell us more.

Homeopathy & private health insurance; the lesson from the UK

BUPA Australia categorises homeopaths as ancillary providers, and consultations with them atatract benefit payments. However, in 2012 BUPA UK withdrew cover for homeopathy. This followed the publication of a White Paper: The Case Against Homeopathy, which concluded that it was an ineffective practice and its use is discouraged."

In 2010 the UK <u>House of Commons Science and Technology Committee</u>, although falling short of banning Homeopathy, concluded that homeopathic remedies performed no better than placebos, and that the principles on which homeopathy is based are "scientifically implausible". The UK <u>NHS</u> website supports these findings. In the US, these remedies are categorized as a drug and are therefore exempt from FDA re-

quirements for pre-market clinical trial evaluation. They were grandfathered into the Food, Drug and Cosmetic Act of 1938. The FDA states that, while homeopathic remedies may be freely marketed for historical reasons, they are "not aware of scientific evidence to support homeopathy as effective."

Australia has a <u>risk-based approach</u> with a <u>two-tiered system for the regulation of all medicines</u> and for <u>homeopathic and other complementary medicines</u>. Homeopathic remedies <u>are exempt</u> from Therapeutic Goods Act 1989 **because they lack any active ingredient**, although some preparations are <u>listed</u>.

Clearly this situation needs to be corrected by BUPA in the near future.



Recommendations for pathology tests in Australia

Following our publication of the RPCA / FSM Pathology Recommendations in October 2013, FSM received a response from the Department of Health that the recommendations "will be provided to the Pathology Services Advisory Committee (PSAC) for consideration". This committee's role includes advising the Department on pathology services. To date there has been no report to FSM or any action.

These recommendations looked at the accuracy and reliability of a range of tests, and their report also included a table of "Non Medicare approved tests that have no proven validity and should be avoided". FSM also wrote to each of the National Boards of registered health practitioners, asking for endorsement of the report, but they responded that our request was outside the scope of their powers as defined in the Health Practitioner Regulation National Law.

The Medical Board of Australia informed us that this year they were intending to develop additional guidance for medical practitioners about practising alternative medicine, that they would ensure that FSM would be advised when the draft guidance became available for public comment and that they would welcome our feedback.

The Royal Australian College of General Practitioners (RACGP) responded to our publication that, although they were supportive of the intent, they were unable to endorse the campaign, stating that there were many examples of tests that fall into the 'inappropriate' or 'unnecessary' category that have been 'grandfathered' into the Medicare system and that the issues deserve greater focus and public debate.

FSM does not agree with this position as the misuse of a scientifically valid test (e.g. measuring prostate specific antigen) is a very different matter from a test that is without scientific credibility such as Live Blood Analysis (e.g. Hemaview). FSM will continue its dialogue with the College.



The following is an interesting example of how the potential misuse of pathology tests and difficulties is confronting GPs when they are asked for pathology tests for their patients and their family members on behalf of their alternative practitioners. One of our Friends, a GP, refused a patient request for tests for herself and her children.

The patient complained to the Medical Board. The response of the GP to the Board included the following most appropriate and clarifying statements:

- tests ordered by a doctor must be to assist in the necessary clinical management of the patient:
- a test must be ordered after clinical examination of a patient, to assure the doctor that it clinically necessary in reaching a diagnosis or medical purpose;
- for a valid clinical consultation, the patient must be physically present, and a consultation is not rebatable unless this is satisfied, and
- tests may not be ordered in consequence without direct knowledge of the patient.

These tests, if rebated against Medicare, would cost taxpayers hundreds of dollars. Patients can, however, attend a pathologist to request a self-determined test, which is not Medicare-rebatable.

FSM congratulated the GP, and encourages other GPs to take a similar firm stand in comparable situations.



Stop the AVN

FSM sent a letter to Ken McLeod from the Stop the AVN (SAVN) team, congratulating the group on their considerable efforts challenging misinformation and scaremongering about the risks and benefits of vaccination from the anti-vaccination organisation, formerly known as the Australian Vaccination Network (AVN).

In the letter FSM said:

"In the early days of the AVN campaign some media regarded them as a legitimate and informed voice that should be heard to balance the debate. Worse, they were sometimes promoted by organisations dispensing health advice to the public. This has all changed thanks to your considerable personal efforts and that of the SAVN team. Strong leadership, a focus on good information and an excellent relationship with the media have made a significant difference."

SAVN have successfully challenged the AVN, resulting in a change of their name to Australian Vaccination-skeptics Network This change of name better informs Australians about the real intentions of the group. It has also lost its undeserved status as a charity. A job well done. FSM continue to support the ongoing efforts of SAVN.

FSM submissions

Health Care Complaints Commission Community Services & Health Indus-(NSW)

The Committee on the Health Care Complaints Commission is currently conducting an <u>Inquiry</u> into "The Promotion of False or Misleading Health-Related Information or Practices". FSM welcomes this Inquiry, as it has the potential to stimulate changes necessary to better protect the health and safety of the people of NSW and ensure that expenditure on public health measures is both cost-effective and justifiable.

Concerned about the widespread promotion of potentially harmful, unscientific information by providers offering health-related products and services, FSM sent in a submission, and also requested attendance at next year's hearing.

try Skills Council (CS&HIS)

Concerned about the accreditation of complementary and alternative "qualifications" (from Diploma to Degree status), FSM sent in a submission to the CS&HISC's 'Review of the Complementary and Alternative Health qualifications—Alignment of Qualifications to the Australian Qualifications Framework'.

FSM stated that there should be a requirement by the CS&HISC that:

- the teaching of said health treatment be traceable to experimentally established findings that do not conflict with well-established principles of physics, chemistry, and biology including physiology and pharmacology;
- that any acceptable treatment is subject to ongoing research, in which the methodology conforms to accepted scientific standards and the results are published in peer-reviewed publications of acceptable standard, and
- that students understand and comply with the accepted scientific methodology of analysing the mechanisms of action, the effect and outcomes of treatments.

With inappropriate accreditation, students can obtain a qualification from a purported 'expert', despite the treatment having no scientific bases or proven effectiveness.





Recognition

Guy Nolch, Editor, Australasian Science, received the "Unsung Hero of Australian Science Communication" award from the Australian Science Communicators.

FSM CEO, Loretta Marron was awarded a Medal of the Order of Australia for "service to community health".

Publications

'The Bitter Pill' - Australasian Science

John Hayman

Getting to the Bottom of Colon Cleansing
How Charles Darwin Was Cured by Water

Darwin's Diagnoses

David Hawkes Seeking evidence for Chinese Medicine
Prof Rob Morrison A Catalyst for Better Science Journalism

MJA Insight

Mr John Cunningham, Joanne Benhamu & Dr David Hawkes

The need for a chiropractic adverse reporting system in Australia

Prof John Dwyer <u>Promoting Wellness</u>

Complementary storm

edzardernst.com

Prof Edzard Ernst Alternative practitioners often endanger the lives of cancer patients

The alchemists of alternative medicine (series) Which therapy is best for low back pain?

I2P

Loretta Marron Why is WHO guilty of WOO?

Is Chiropractic at a Crossroad?

<u>Craniosacral therapy - Superlative science or silly sorcery?</u>

The Conversation

Prof Ian Musgrave Vaccines and toxins, more misunderstanding

<u>Herbal Medicines: what do the labels say?</u>
No Evidence Homeopathy is Effective

Dr Mick Vagg Quackademic medicine...coming soon to a uni near you

Crikey

Loretta Marron End of the Road for Homeopathy

Trends in Pharmacological Sciences

Dr David Hawkes & Joanne Benhamu

Pharmacological examination of TCM should be evidence based

Science-Based Medicine

Dr Mark Crislip Agnotology: The Study of Ignorance

Dr Harriet Hall Nature vs. Technology

Forbes

Please let **FSM** know if you have published any relevant articles, been on radio or TV (with links, if possible), or any of your activities that support the objectives of Friends of Science in Medicine.